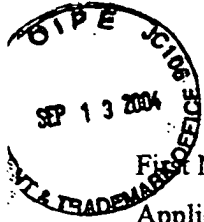


32692

Customer Number

Patent
Case No.: 56759US010



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named Inventor: AUSEN, RONALD W.

Application No.: 10/619048

Group Art Unit: 3677

Filed: July 14, 2003

Examiner: Unknown

Title: HEAT TREATED PROFILE EXTRUDED HOOK

PRELIMINARY AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on:	
<u>9-8-04</u> Date	<u>Cheryl L. Schmitz</u> Signed by: Cheryl L. Schmitz

Dear Sir:

Prior to initial examination, please enter the following preliminary amendment in the above-referenced application.

09/17/2004 14:21:11 00000000 103723 10815040

01 FC:1201 86.00 DA
02 FC:1202 126.00 DA

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

5675945010

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	94	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	94 minus 20 =	* 74
INDEPENDENT CLAIMS	10 minus 3 =	* 7
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

9/13/04

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 101	Minus ** 94	= 7
Independent	* 11	Minus *** 10	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

1, 20, 31, 49, 70, 78, 79, 80, 81, 82, 98,

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

RATE	FEE
BASIC FEE	375.00
X\$ 9=	
X42=	
+140=	
TOTAL	

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	750.00
X\$18=	1332
X84=	588
+280=	
TOTAL	2670

SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	
ADDITIONAL FEE	

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$18=	126
X84=	86
+280=	
TOTAL	
ADDITIONAL FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	
ADDITIONAL FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	
ADDITIONAL FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	
ADDITIONAL FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	
ADDITIONAL FEE	

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